



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## \*BIBDATASHEET\*

Bib Data Sheet

CONFIRMATION NO. 3485

|  |   |                               |  |                                   |                            |
|--|---|-------------------------------|--|-----------------------------------|----------------------------|
| SERIAL NUMBER<br>10/771,909  | FILING OR 371(c)<br>DATE<br>02/03/2004<br>RULE  | CLASS<br>604                  | GROUP ART UNIT<br>1615   | ATTORNEY<br>DOCKET NO.<br>206,424 |                            |
| <b>APPLICANTS</b><br>Zohar Avrahami, Rehovot, ISRAEL;  |   |                               |  |                                   |                            |
| <b>** CONTINUING DATA *****</b><br>This application is a CON of 10/021,586 12/12/2001 PAT 6,711,435 which is a CON of 09/635,892 08/10/2000 PAT 6,615,079 which is a DIV of 09/189,170 11/09/1998 PAT 6,148,232  |   |                               |  |                                   |                            |
| <b>** FOREIGN APPLICATIONS *****</b>   |   |                               |  |                                   |                            |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** SMALL ENTITY **<br>** 05/03/2004   |   |                               |  |                                   |                            |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met<br>Allowance<br>Verified and<br>Acknowledged<br>Examiner's Signature<br>Initials |   | STATE OR<br>COUNTRY<br>ISRAEL | SHEETS<br>DRAWING<br>6   | TOTAL<br>CLAIMS<br>1              | INDEPENDENT<br>CLAIMS<br>1 |
| <b>ADDRESS</b><br>ABELMAN, FRAYNE & SCHWAB<br>666 Third Avenue-10th Floor<br>New York, NY10017   |   |                               |  |                                   |                            |
| <b>TITLE</b><br>TRANSDERMAL DRUG DELIVERY AND ANALYTE EXTRACTION   |   |                               |  |                                   |                            |
| FILING FEE<br>RECEIVED<br>385  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                   |                            |